

|  |  |   |   |       |         |             |
|--|--|---|---|-------|---------|-------------|
| No. <b>W 21043</b>   | <b>Due no later than Oct 31, 2018</b><br><b>Annual Report Form</b>                           |   | 2. Registered Agent and Address <b>(NO PO BOX)</b>    |       |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> | <b>1. Mailing Address: Correct in this box if needed.</b>                                    |   | REMY TOMCHAK<br>432 SHOUP AVE<br>IDAHO FALLS ID 83402 |       |         |             |
|  | SHOUP PROFESSIONAL BUILDING LLC<br>REMY TOMCHAK<br>PO BOX 50858<br>IDAHO FALLS ID 83405-0858 |   | 3. <u>New</u> Registered Agent Signature:*            |       |         |             |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.   |  |   |   |       |         |             |
| Office Held  | Name   | Street or PO Address  | City  | State | Country | Postal Code |
| MEMBER   | RLT REVOCABLE LIVING TRUST   | 3027 TIPPERARY LN   | IDAHO FALLS   | ID    |         | 83404       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 21043</b>   |  | 6. Annual Report must be signed.*<br>Signature: remy tomchak<br>Name (type or print): remy tomchak<br>Date: 09/05/2018<br>Title: member |   |       |         |             |
| Processed 09/05/2018   |  | * Electronically provided signatures are accepted as original signatures.   |   |       |         |             |